

ARIZONA STATE-COORDINATED IEP FACILITATOR REQUEST FORM

Instructions:

1. A State-coordinated IEP facilitator may be requested by *either* the parents of a child with a disability, or the public education agency (PEA). To initiate the process, the requesting party must return this completed form to the Alternative Dispute Resolution (ADR) Specialist at the Arizona Department of Education/Dispute Resolution (ADE/DR) contact information below.
2. The ADR Specialist will then contact the other party to determine if there is an agreement to participate. State coordinated IEP meeting facilitation is a *voluntary* early resolution option available to IEP teams experiencing conflict or communication difficulties, therefore, both parties must agree to participate.
3. If both parties agree to participate, the ADR Specialist will assign a facilitator, who will assist in scheduling an IEP meeting at a mutually agreeable time and place for both parties. The PEA will provide meeting notices to all parties.

Return the Request Form using the contact options below:

Alternative Dispute Resolution Specialist
Phone: 602-542-7579
Email: FLIEPInBox@azed.gov
Fax: 602-364-0641

Arizona Department of Education
Dispute Resolution Unit
1535 W. Jefferson St. Bin #62
Phoenix, AZ 85007

Date of Request: _____

Requestor: ☐ Parent ☐ PEA Print your name: _____

School/District/Charter Name: _____

The last IEP team meeting was held on (date): _____

Type of IEP: ☐ Initial ☐ Annual ☐ Other: _____

What is the annual review deadline? (date): _____

- What do you hope a facilitator will bring to the meeting?
- How might a facilitator change the team dynamic?
- What methods have been applied to help resolve your concerns?
 - 1.
 - 2.
 - 3.

Reference Number _____



We are requesting assistance in facilitating an IEP meeting and understand and agree to the following:

- ADE/DR will provide a neutral State-coordinated facilitator at no cost to the participants.
- The goal of the facilitated IEP meeting is to develop an IEP that provides a free appropriate public education (FAPE) to the student.
- Using a facilitator is voluntary and cannot be used to delay or deny the parent's rights to request mediation or file a due process complaint to request a hearing.
- The facilitation will only take place if the required IEP team members are present or excused appropriately.
- The facilitator is not a member of the IEP team, cannot provide legal advice to any participant, and does not represent the parent, student, school, district/charter school, or ADE/DR.
- The public education agency (PEA) remains responsible for the education of the student and thus must make decisions when consensus is not possible. The PEA will provide prior written notice documenting its proposals and refusals to initiate or change the student's identification, evaluation, placement, or FAPE.

Please complete the following:

Student's Name:
Parent/Guardian Name(s)*:
Address:
City, State, Zip:
Phone Number:
Email Address:
School District/Charter Name:
School Administrator's Name and Title:
Address:
City, State, Zip:
Phone Number:
Email Address:

***Include all parents/guardians with educational rights that are likely to attend the IEP meeting.**

Date: _____ Requestor / Participant Signature: _____

Authorization to Release Educational Data (for parents)

If you are a parent requesting a facilitator, please complete this section:

By agreeing to participate in a facilitated IEP meeting, we are authorizing _____
School District / Charter School

and its employees, agents, and contractors to disclose information to the State-coordinated facilitator regarding our child's identity, needs, and issues surrounding disagreements about educational programming. I understand that this information will be kept confidential.

Date: _____ Parent/Guardian Signature: _____

Reference Number _____

